

AT/ANZ074
CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION
AMENDMENT

STATEMENT OF ECONOMIC INTERESTS
RECEIVED
COVER PAGE
FAIR POLITICAL PRACTICES COMMISSION



Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)
Rogers Peter James

1. Office, Agency, or Court

Agency Name (Do not use acronyms)

City of Chino Hills

Division, Board, Department, District, if applicable

Your Position

City Council Member

► If filing for multiple positions, list below or on an attachment. (Do not use acronyms)

Agency: See Expanded

Position:

2. Jurisdiction of Office (Check at least one box)

☐ State

☐ Judge or Court Commissioner (Statewide Jurisdiction)

☐ Multi-County

☐ County of

☒ City of

☐ Other

3. Type of Statement (Check at least one box)

☒ Annual: The period covered is January 1, 2014, through December 31, 2014.

☐ Leaving Office: Date Left ____/____/____
(Check one)

-or-

The period covered is ____/____/____, through December 31, 2014.

☐ The period covered is January 1, 2014, through the date of leaving office.

☐ Assuming Office: Date assumed ____/____/____

☐ The period covered is ____/____/____, through the date of leaving office.

☐ Candidate: Election year ____ and office sought, if different than Part 1: ____

4. Schedule Summary

Check applicable schedules or "None."

► Total number of pages including this cover page: 2

☒ Schedule A-1 - Investments - schedule attached

☐ Schedule C - Income, Loans, & Business Positions - schedule attached

☒ Schedule A-2 - Investments - schedule attached

☒ Schedule D - Income - Gifts - schedule attached

☒ Schedule B - Real Property - schedule attached

☐ Schedule E - Income - Gifts - Travel Payments - schedule attached

-or-

☐ None - No reportable interests on any schedule

I certify under penalty of perjury under the laws of the State of

Date Signed 03/03/2015

(month, day, year)

Do not attach brokerage or financial statements.

2015 FEB 1, AM 10:07

Please type or print in ink.

NAME OF FILER (LAST) (FIRST)
Rogers Peter
OFFICE OF CLERK
CHINO HILLS
James

1. Office, Agency, or Court

Agency Name (Do not use acronyms)

City of Chino Hills

Division, Board, Department, District, if applicable

Your Position

Council Member

► If filing for multiple positions, list below or on an attachment. (Do not use acronyms)

Agency: See Expanded

Position:

2. Jurisdiction of Office (Check at least one box)

☐ State

☐ Judge or Court Commissioner (Statewide Jurisdiction)

☐ Multi-County

☐ County of

☐ City of

☐ Other

3. Type of Statement (Check at least one box)

☐ Annual: The period covered is January 1, 2013, through December 31, 2013.

☐ Leaving Office: Date Left / / (Check one)

-or-

The period covered is / / through December 31, 2013.

☐ The period covered is January 1, 2013, through the date of leaving office.

☐ Assuming Office: Date assumed / /

☐ The period covered is / / through the date of leaving office.

☐ Candidate: Election year and office sought, if different than Part 1:

4. Schedule Summary

Check applicable schedules or "None."

► Total number of pages including this cover page: 6

☒ Schedule A-1 - Investments - schedule attached

☐ Schedule C - Income, Loans, & Business Positions - schedule attached

☒ Schedule A-2 - Investments - schedule attached

☒ Schedule D - Income - Gifts - schedule attached

☒ Schedule B - Real Property - schedule attached

☐ Schedule E - Income - Gifts - Travel Payments - schedule attached

-or-

☐ None - No reportable interests on any schedule

5.

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date Signed 02/19/2015

(month, day, year)

**FORM 700 – STATEMENT OF ECONOMIC INTERESTS
EXPANDED STATEMENT FOR**

PETER ROGERS

2014 Annual Statements –

1. Chino Basin Desalter Authority, Board Member
Multi-County – San Bernardino and Riverside
2. Omnitrans – Alternate Director
County of San Bernardino
3. Water Facilities Authority, Director
Other – San Bernardino County

SCHEDULE A-1**Investments****Stocks, Bonds, and Other Interests**

(Ownership Interest is Less Than 10%)

Do not attach brokerage or financial statements.

CALIFORNIA FORM 700

FAIR POLITICAL PRACTICES COMMISSION

Name

Peter J Rogers

▶ NAME OF BUSINESS ENTITY

Apple

GENERAL DESCRIPTION OF THIS BUSINESS

FAIR MARKET VALUE

☐ \$2,000 - \$10,000 ☒ \$10,001 - \$100,000
☐ \$100,001 - \$1,000,000 ☐ Over \$1,000,000

NATURE OF INVESTMENT

☒ Stock ☐ Other _____ (Describe)
☐ Partnership ☐ Income Received of \$0 - \$499
☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:

 ____/____/13 ____/____/13
 ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY

GENERAL DESCRIPTION OF THIS BUSINESS

FAIR MARKET VALUE

☐ \$2,000 - \$10,000 ☐ \$10,001 - \$100,000
☐ \$100,001 - \$1,000,000 ☐ Over \$1,000,000

NATURE OF INVESTMENT

☐ Stock ☐ Other _____ (Describe)
☐ Partnership ☐ Income Received of \$0 - \$499
☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:

 ____/____/13 ____/____/13
 ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY

GENERAL DESCRIPTION OF THIS BUSINESS

FAIR MARKET VALUE

☐ \$2,000 - \$10,000 ☐ \$10,001 - \$100,000
☐ \$100,001 - \$1,000,000 ☐ Over \$1,000,000

NATURE OF INVESTMENT

☐ Stock ☐ Other _____ (Describe)
☐ Partnership ☐ Income Received of \$0 - \$499
☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:

 ____/____/13 ____/____/13
 ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY

IBM

GENERAL DESCRIPTION OF THIS BUSINESS

FAIR MARKET VALUE

☐ \$2,000 - \$10,000 ☒ \$10,001 - \$100,000
☐ \$100,001 - \$1,000,000 ☐ Over \$1,000,000

NATURE OF INVESTMENT

☒ Stock ☐ Other _____ (Describe)
☐ Partnership ☐ Income Received of \$0 - \$499
☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:

 ____/____/13 ____/____/13
 ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY

GENERAL DESCRIPTION OF THIS BUSINESS

FAIR MARKET VALUE

☐ \$2,000 - \$10,000 ☐ \$10,001 - \$100,000
☐ \$100,001 - \$1,000,000 ☐ Over \$1,000,000

NATURE OF INVESTMENT

☐ Stock ☐ Other _____ (Describe)
☐ Partnership ☐ Income Received of \$0 - \$499
☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:

 ____/____/13 ____/____/13
 ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY

GENERAL DESCRIPTION OF THIS BUSINESS

FAIR MARKET VALUE

☐ \$2,000 - \$10,000 ☐ \$10,001 - \$100,000
☐ \$100,001 - \$1,000,000 ☐ Over \$1,000,000

NATURE OF INVESTMENT

☐ Stock ☐ Other _____ (Describe)
☐ Partnership ☐ Income Received of \$0 - \$499
☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:

 ____/____/13 ____/____/13
 ACQUIRED DISPOSED

Comments: _____

FPPC Form 700 (2013/2014)

FPPC Advice Email: advice@fppc.ca.gov

FPPC Toll-Free Helpline: 866/275-3772 www.fppc.ca.gov

SCHEDULE A-2
Investments, Income, and Assets
of Business Entities/Trusts
(Ownership Interest is 10% or Greater)

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION
Name Peter J Rogers

1. BUSINESS ENTITY OR TRUST	
Peter Rogers Photography	
Name	
15338 Cinnabar Ct., Chino Hills, CA 91709	
Address (Business Address Acceptable)	
Check one <input type="checkbox"/> Trust, go to 2 <input checked="" type="checkbox"/> Business Entity, complete the box, then go to 2	
GENERAL DESCRIPTION OF THIS BUSINESS	
FAIR MARKET VALUE <input type="checkbox"/> \$0 - \$1,999 <input type="checkbox"/> \$2,000 - \$10,000 <input checked="" type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> \$100,001 - \$1,000,000 <input type="checkbox"/> Over \$1,000,000	IF APPLICABLE, LIST DATE: ____/____/14 ____/____/14 ACQUIRED DISPOSED
NATURE OF INVESTMENT <input type="checkbox"/> Partnership <input checked="" type="checkbox"/> Sole Proprietorship <input type="checkbox"/> Other	
YOUR BUSINESS POSITION <u>Owner</u>	
2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)	
<input type="checkbox"/> \$0 - \$499 <input type="checkbox"/> \$500 - \$1,000 <input type="checkbox"/> \$1,001 - \$10,000	<input checked="" type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> OVER \$100,000
3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary)	
<input type="checkbox"/> None or <input type="checkbox"/> Names listed below	
4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST	
Check one box: <input type="checkbox"/> INVESTMENT <input type="checkbox"/> REAL PROPERTY	
Name of Business Entity, if Investment, or Assessor's Parcel Number or Street Address of Real Property	
Description of Business Activity or City or Other Precise Location of Real Property	
FAIR MARKET VALUE <input type="checkbox"/> \$2,000 - \$10,000 <input type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> \$100,001 - \$1,000,000 <input type="checkbox"/> Over \$1,000,000	IF APPLICABLE, LIST DATE: ____/____/14 ____/____/14 ACQUIRED DISPOSED
NATURE OF INTEREST <input type="checkbox"/> Property Ownership/Deed of Trust <input type="checkbox"/> Stock <input type="checkbox"/> Partnership	
<input type="checkbox"/> Leasehold Yrs. remaining <input type="checkbox"/> Other	
<input type="checkbox"/> Check box if additional schedules reporting investments or real property are attached	

1. BUSINESS ENTITY OR TRUST	
Name	
Address (Business Address Acceptable)	
Check one <input type="checkbox"/> Trust, go to 2 <input type="checkbox"/> Business Entity, complete the box, then go to 2	
GENERAL DESCRIPTION OF THIS BUSINESS	
FAIR MARKET VALUE <input type="checkbox"/> \$0 - \$1,999 <input type="checkbox"/> \$2,000 - \$10,000 <input type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> \$100,001 - \$1,000,000 <input type="checkbox"/> Over \$1,000,000	IF APPLICABLE, LIST DATE: ____/____/14 ____/____/14 ACQUIRED DISPOSED
NATURE OF INVESTMENT <input type="checkbox"/> Partnership <input type="checkbox"/> Sole Proprietorship <input type="checkbox"/> Other	
YOUR BUSINESS POSITION	
2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)	
<input type="checkbox"/> \$0 - \$499 <input type="checkbox"/> \$500 - \$1,000 <input type="checkbox"/> \$1,001 - \$10,000	<input type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> OVER \$100,000
3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary)	
<input type="checkbox"/> None or <input type="checkbox"/> Names listed below	
4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST	
Check one box: <input type="checkbox"/> INVESTMENT <input type="checkbox"/> REAL PROPERTY	
Name of Business Entity, if Investment, or Assessor's Parcel Number or Street Address of Real Property	
Description of Business Activity or City or Other Precise Location of Real Property	
FAIR MARKET VALUE <input type="checkbox"/> \$2,000 - \$10,000 <input type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> \$100,001 - \$1,000,000 <input type="checkbox"/> Over \$1,000,000	IF APPLICABLE, LIST DATE: ____/____/14 ____/____/14 ACQUIRED DISPOSED
NATURE OF INTEREST <input type="checkbox"/> Property Ownership/Deed of Trust <input type="checkbox"/> Stock <input type="checkbox"/> Partnership	
<input type="checkbox"/> Leasehold Yrs. remaining <input type="checkbox"/> Other	
<input type="checkbox"/> Check box if additional schedules reporting investments or real property are attached	

Comments: _____

SCHEDULE B
Interests in Real Property
(Including Rental Income)

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION

Name

Peter J Rogers

▶ ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS
15338 Cinnabar Ct

CITY
Chino Hills

FAIR MARKET VALUE
☐ \$2,000 - \$10,000
☒ \$10,001 - \$100,000
☐ \$100,001 - \$1,000,000
☐ Over \$1,000,000

IF APPLICABLE, LIST DATE:
_____/_____/14 ____/_____/14
ACQUIRED DISPOSED

NATURE OF INTEREST
☒ Ownership/Deed of Trust ☐ Easement
☐ Leasehold ☐ _____
Yrs. remaining Other

IF RENTAL PROPERTY, GROSS INCOME RECEIVED
☐ \$0 - \$499 ☐ \$500 - \$1,000 ☐ \$1,001 - \$10,000
☐ \$10,001 - \$100,000 ☐ OVER \$100,000

SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.
☐ None

▶ ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS

CITY

FAIR MARKET VALUE
☐ \$2,000 - \$10,000
☐ \$10,001 - \$100,000
☐ \$100,001 - \$1,000,000
☐ Over \$1,000,000

IF APPLICABLE, LIST DATE:
_____/_____/14 ____/_____/14
ACQUIRED DISPOSED

NATURE OF INTEREST
☐ Ownership/Deed of Trust ☐ Easement
☐ Leasehold ☐ _____
Yrs. remaining Other

IF RENTAL PROPERTY, GROSS INCOME RECEIVED
☐ \$0 - \$499 ☐ \$500 - \$1,000 ☐ \$1,001 - \$10,000
☐ \$10,001 - \$100,000 ☐ OVER \$100,000

SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.
☐ None

* You are not required to report loans from commercial lending institutions made in the lender's regular course of business on terms available to members of the public without regard to your official status. Personal loans and loans received not in a lender's regular course of business must be disclosed as follows:

NAME OF LENDER*

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF LENDER

INTEREST RATE TERM (Months/Years)
_____% ☐ None

HIGHEST BALANCE DURING REPORTING PERIOD
☐ \$500 - \$1,000 ☐ \$1,001 - \$10,000
☐ \$10,001 - \$100,000 ☐ OVER \$100,000
☐ Guarantor, if applicable

NAME OF LENDER*

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF LENDER

INTEREST RATE TERM (Months/Years)
_____% ☐ None

HIGHEST BALANCE DURING REPORTING PERIOD
☐ \$500 - \$1,000 ☐ \$1,001 - \$10,000
☐ \$10,001 - \$100,000 ☐ OVER \$100,000
☐ Guarantor, if applicable

Comments: My photo business is located at my home.

SCHEDULE D **Income – Gifts**

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION

Name

Peter J Rogers

► NAME OF SOURCE (Not an Acronym)

Harkins Theatres

ADDRESS (Business Address Acceptable)

7511 E McDonald Dr., Scottsdale, AZ

BUSINESS ACTIVITY, IF ANY, OF SOURCE

Movie Theaters

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
01 / 02 / 14	\$ 80.00	Movie pass
__ / __ / __	\$ _____	_____
__ / __ / __	\$ _____	_____

► NAME OF SOURCE (Not an Acronym)

Boys Republic

ADDRESS (Business Address Acceptable)

1907 Boys Republic Dr, Chino Hills, CA

BUSINESS ACTIVITY, IF ANY, OF SOURCE

School

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
12 / 01 / 14	\$ 50.00	Wreath
__ / __ / __	\$ _____	_____
__ / __ / __	\$ _____	_____

► NAME OF SOURCE (Not an Acronym)

Fairplex

ADDRESS (Business Address Acceptable)

1101 W McKinley Ave., Pomona, CA

BUSINESS ACTIVITY, IF ANY, OF SOURCE

LA County Fair

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
09 / 24 / 14	\$ 150.00	Dinner at Fairplex
__ / __ / __	\$ _____	_____
__ / __ / __	\$ _____	_____

► NAME OF SOURCE (Not an Acronym)

Planes of Fame Air Museum

ADDRESS (Business Address Acceptable)

7000 Merrill Ave #17, Chino, CA

BUSINESS ACTIVITY, IF ANY, OF SOURCE

Museum/Air Show

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
04 / 14 / 14	\$ 115.00	Air Show Passes
__ / __ / __	\$ _____	_____
__ / __ / __	\$ _____	_____

► NAME OF SOURCE (Not an Acronym)

KV Kumar

ADDRESS (Business Address Acceptable)

PO Box 17131, Anaheim, CA

BUSINESS ACTIVITY, IF ANY, OF SOURCE

Property Consultant

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
12 / 06 / 14	\$ 80.00	Christmas Basket
12 / 06 / 14	\$ 45.00	Christmas Basket
__ / __ / __	\$ _____	_____

► NAME OF SOURCE (Not an Acronym)

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
__ / __ / __	\$ _____	_____
__ / __ / __	\$ _____	_____
__ / __ / __	\$ _____	_____

Comments: _____